



# Drive To Stay Alive

## Teen Driving Academy

### Student Registration Form

#### Student Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

*Last*

*First*

*M.I.*

Address: \_\_\_\_\_

*Street Address*

*Apartment/Unit #*

*City*

*State*

*ZIP Code*

Phone: (     )

Cell: (     )

Date of Birth:

Social Security No.:

Sex:

Driver's Lic. #:

E-mail Address:

Have you ever been cited for a moving violation?

YES

NO

☐☐

If yes, when?

Have you ever been involved in a motor vehicle collision?

YES

NO

☐☐

If yes, explain:

T-shirt Size: ☐ Small ☐ Medium ☐ Large ☐ X-Large ☐ XX-Large ☐ XXX-Large

#### School Information

High School:

Address:

Contact Person:

Contact No.: (     )

E-mail Address:

#### Student Eligibility Requirements

- 16 years of age or older
- Licensed driver
- Highly motivated individual
- Good communication skills
- Enthusiasm
- Good leadership traits
- Must be able to complete the 4 1/2-day training without interruption, i.e. sports, events, other activities, etc.

#### Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature Parent/ Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Return application form to: Kentucky State Police  
Attn: Lori Hunsaker  
919 Versailles Road  
Frankfort, KY 40601**